Section

UNITED STATES

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

NOV 1 D 2008

TEMPORARY FORM D

OMB APPROVAL
OMB Number: 3235-0076
Expires: September 30, 2008
Estimated average burden
hours per response. . . . 4.00

Washington, DC NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an amendment and name has changed, and indicate changed Sale of Preferred Units and Warrants	e.)
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section Type of Filing: New Filing Amendment	on 4(6) ULOE
A. BASIC IDENTIFICATION DATA	A MARIN ARIAH CANA ARIAH A
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	CONTRACTOR OF THE CONTRACTOR AND
Brown Advisory Management, LLC	08064583
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
901 South Bond Street, Suite 400, Baltimore, MD 21231	410-537-5400
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	DD0.0-1-1-
Brown Advisory Management, LLC provides investment management, strategic advisory	and brokerage services. PROCESSE
Type of Business Organization corporation	please specify): NOV 2 1 2008 Liability Company THOMSON REUT
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction) GENERAL INSTRUCTIONS Note: This is a special Temporary Form D (17 CFR 239.500T) that CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 Conotice in paper format on or after September 15, 2008 but before March 16, 2009. During that per initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using comply with all the requirements of § 230.503T. Federal: Who Must File: All issuers making an offering of securities in reliance on an exception under Regiseq. or 15 U.S.C. 77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at address after the date on which it is due, on the date it was mailed by United States registered or confidence of the Securities. We shington, D.C. 2 Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be must be a photocopy of the manually signed copy or bear typed or printed signatures.	is available to be filed instead of Form D (17 CFR 239.500T) or an amendment to such a riod, an issuer also may file in paper format an g Form D (17 CFR 239.500) and otherwise ulation D or Section 4(6), 17 CFR 230.501 et offering. A notice is deemed filed with the U.S. the address given below or, if received at that ertified mail to that address.
Information Required: A new filing must contain all information requested. Amendments need only any changes thereto, the information requested in Part C, and any material changes from the information Part E and the Appendix need not be filed with the SEC. Filing Fee: There is no federal filing fee. State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate each state where sales are to be, or have been made. If a state requires the payment of a fee as a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate Appendix to the notice constitutes a part of this notice and must be completed. ATTENTION	of for sales of securities in those states that the notice with the Securities Administrator in precondition to the claim for the exemption, a

filing of a federal notice.

		A. BASIC ID	ENTIFICATION DATA			
2. Enter the information rec	quested for the fol	lowing:				
 Each promoter of the 	ne issuer, if the iss	uer has been organized v	within the past five years;			
Each beneficial own	er having the pow	er to vote or dispose, or di	irect the vote or disposition	of, 10% or more o	f a class of equity securities of the iss	uer.
Each executive office	cer and director o	f corporate issuers and of	f corporate general and ma	naging partners of	partnership issuers; and	
• Each general and m	anaging partner o	f partnership issuers.				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or	_
check box(es) that rippily.		E Denement Owner			Managing Partner	
Full Name (Last name first, if	individual)			•		
Brown Advisory Holdings	Incorporated					
Business or Residence Addres	s (Number and	Street, City, State, Zip C	ode)	·		
901 South Bond Street, Suite	400, Baltimore, M	ID 21231				
Check Box(es) that Apply:	Promoter	■ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if	individual)				-,	
Buppert, Hobart C. II						
Business or Residence Address	s (Number and	Street, City, State, Zip C	ode)			
15635 Chilcoat Lane, Spa	arks, MD 2115	2				
Check Box(es) that Apply:	Promoter	■ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if	individual)				······································	
Behrens, Bruce E.						
Business or Residence Addres	s (Number and	Street, City, State, Zip C	ode)		·	
7506 L'Hirondelle Club R	Road, Ruxton, N	4D 21204				
Check Box(es) that Apply:	Promoter	■ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if	individual)			,		_
Owen, Lee S.						
Business or Residence Address	s (Number and	Street, City, State, Zip C	ode)			
P.O. Box 191, Gibson Island,	MD 21056					
Check Box(es) that Apply:	Promoter	■ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if	individual)					
Vernon, R. Hutchings						
Business or Residence Address	s (Number and	Street, City, State, Zip C	ode)	-	'	
6011 Hollins Avenue, B	altimore, MD	21210				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if	`individual)	•	-			
ABS Capital Partners V	′, L.P.					
Business or Residence Address	s (Number and	Street, City, State, Zip C	ode)			
400 East Pratt Street, Bal	timore, MD 21	202			<u></u>	
Check Box(es) that Apply:	Promoter	■ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if	individual)					
The Bunting Famliy Private	vate Fund LLC					
Business or Residence Addre c/o Bunting Management Group, 217 Into	ess (Number an ernational Circle, Hunt Va	d Street, City, State, Zi				
	(Use blank	sheet, or copy and use	additional copies of this	sheet, as necessa	ary)	

			· · · · · · · · · · · · · · · · · · ·		В. П	NFORMATI	ON ABOU	T OFFERI	ING				
1.	Has the	issuer sold	l, or does th	ne issuer ir	ntend to se	ll. to non-a	credited in	nvestors in	this offeri	ing?		Yes	No 💌
			,			Appendix,				-		L.J	
2.	What is	the minim	um investn	ent that w	ill be acce	pted from a	ny individ	ual?	**********			\$	93.75
3.	Does th	Does the offering permit joint ownership of a single unit?									Yes ⊠	No □	
4.					_						irectly, any	_	
	commis If a pers or states	sion or sim on to be lis , list the na	ilar remune ted is an ass	ration for s ociated pe roker or de	olicitation rson or age aler. If mo	of purchase nt of a brok ore than five	ers in conne er or deale e (5) persor	ection with r registered as to be list	sales of sec I with the S ed are asso	curities in t SEC and/or	he offering. with a state ons of such		·
Ful	l Name (I	Last name	first, if indi	ividual)									
Bus	iness or	Residence	Address (N	umber and	l Street, Ci	ty, State, Z	ip Code)				<u> </u>		
Nar	ne of Ass	ociated Br	oker or Dea	aler								··· -	
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	urchasers						
	(Check	"All States	" or check	individual	States)							☐ Al	1 States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL.	GA	HI	<u>a</u>
	ш	IN	[IA]	KS	KY	<u>IA</u>	ME	MD	MA	MI	MN	MS	МО
	MT RL	NE SC	NV SD	NH TN	TX	NM UT	NY. VT.	NC. VA	ND WA	ОH) WV	lok. WI	OR WY	PA PR
E.J													
rui	i Name (Last name	first, if indi	(Vidual)									
Bus	siness or	Residence	Address (N	Number an	d Street, C	ity, State, 2	Zip Code)						
Nai	ne of Ass	sociated Br	oker or De	aler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit l	Purchasers				···	·	
	(Check	"All States	or check	individual	States)			***************************************	••••••			☐ Al	1 States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	EL.	GA	ш	
	MT	IN. NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	OH MT	OK	MS OR	MO PA
	RL	SC	SD	TN.	TX	UT	VT	VA.	WA	WV	WI.	WY	PR
Ful	l Name (Last name	first, if indi	ividual)						· · · · ·			
Du		Dagidanaa	Address (1	lumbar an	d Street C	Str. State '	7in Cada)						
Dus	siliess of	Residence	Mudicas (i	vuilioei ali	u Succi, C	nty, State, 1	Lip Code)						
Nai	ne of Ass	sociated Br	oker or De	aler							··· •		
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers				_		
	(Check	"All States	or check	individual	States)	••••••		***************************************		• • • • • • • • • • • • • • • • • • • •	•••••	☐ Al	1 States
	AL	AK	AZ	AR	CA	co	CT	DE	DC	FL	GA	H	Ш
	MT	IN NE	IA. NV	KS NH	KY NI	LA NM	ME NY	MD NC	MA ND	OH MI	OK	MS OR	MO PA
	RI	SC		TN	TX	UT	VT.	VA	WA	WY	WI	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

١.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	Aggregate Offering Price		Amo	ount Already Sold
	Debt	S	_ :	§	
	Equity	S			
	Common Preferred				
	Convertible Securities (including warrants)			<u> </u>	
	Partnership Interests	S	_ :	S	
	Other (Specify Warrant to purchase 0.1667)	17,700,000.0	<u>.</u>	\$	15,930,000.00
	Total	17,700,000.0	<u>.</u> !	S	15,930,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				Aggregate
		Number Investors		Dol	llar Amount Purchases
	Accredited Investors	4	_	\$	15,930,000.00
	Non-accredited Investors		_	\$	
	Total (for filings under Rule 504 only)		_	\$	
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.				
	Type of Offering	Type of Security		Do	llar Amount Sold
	Rule 505			\$	
	Regulation A			\$	
	Rule 504			\$	
	Total			\$	
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees] :	\$	
	Printing and Engraving Costs] :	\$	
	Legal Fees	[2)	\$	100,000.00
	Accounting Fees]	\$	
	Engineering Fees		: נ	\$	
	Sales Commissions (specify finders' fees separately)	[]	\$	
	Other Expenses (identify)	[\$	
	Total		- -	ς.	100,000.00

	C. OFFERING PRICE, NUME	BER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	,
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	ing price given in response to Part C — Question 1 Question 4.a. This difference is the "adjusted gross		\$17,600,000.00
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and fthe payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	[□ s
	Purchase of real estate	[s
	Purchase, rental or leasing and installation of mad and equipment		s	
	Construction or leasing of plant buildings and fac	ilities[s
	Acquisition of other businesses (including the val offering that may be used in exchange for the asso issuer pursuant to a merger)	ets or securities of another	¬ \$	 \$
	Repayment of indebtedness			
	Working capital	·	_	_
	Other (specify):	[
	•		\$	\$
	Column Totals			* \$17,600,000.00
	Total Payments Listed (column totals added)		× \$	17,600,000,00
		D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	mish to the U.S. Securities and Exchange Commis	ssion, upon writter	
Iss	uer (Print or Type)	Signature	Date	
	rown Advisory Management, LLC	A.M.Chall	3100	-08
	me of Signer (Print or Type)	Title of Signer (Print or Type)		
D	avid M. Churchill	Chief Financial Officer of Brown Advisory Holdings Inc., Managi	ng Member of Brown Ad	lvisory Management, LLC

ATTENTION

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No 🗷
	See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date				
Brown Advisory Management, LLC	D. ro-Chaill	31 OCT 08				
Name (Print or Type)	Title (Print or Type)					
David M. Churchill	Chief Financial Officer of Brown Advisory Holdings Inc., Managing Member of Brown Advisory Management,					

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 4 2 3 1 Disqualification under State ULOE Type of security (if yes, attach and aggregate Intend to sell Type of investor and explanation of to non-accredited offering price waiver granted) offered in state amount purchased in State investors in State (Part E-Item 1) (Part C-Item 2) (Part C-Item 1) (Part B-Item 1) Number of Number of Units, each consisting of one LLC Preferred Unit and a Warrant to purchase 0.1667 of one LLC Preferred Unit Accredited Non-Accredited **Investors** Amount Yes No **Investors** State Yes No Amount ΑL ΑK AZAR CA CO CT DE DC FL GA НІ ID ΙL IN IA KS KY LA ME MD × × 4 0 15,930,000.00 15,930,000.00 0 MA ΜI MN MS

			· · · · · · · · · · · · · · · · · · ·	APP	ENDIX				
1	Intendato non-a	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
МТ									
NE									
NV									
NH						_			
ŊJ									
NM									
NY					 				
NC									
ND	-			-					
ОН									
ОК									
OR									
PA				-					
RI									
SC					<u> </u>				
SD									
TN									
TX									
UT									
VT									
VA									
WA									
WV									
WI									

				APP	ENDIX					
1		2	3			5 Disqualification				
	to non-a	d to sell accredited rs in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	f investor and irchased in State C-Item 2)		under State UL (if yes, attach explanation o waiver grante (Part E-Item 1		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR										

